



HAVERSTOCK & OWENS LLP
162 North Wolfe Road
Sunnyvale, California 94086
(408) 530-9700
Customer No. 28960



MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.: JAG-00113

NEW APPLICATION TRANSMITTAL

Sir:

Transmitted herewith for filing is the patent application of Inventor: James A. Gavney Jr.

Title: ORAL-CARE DEVICE AND SYSTEM

CERTIFICATION UNDER 37 CFR § 1.10

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date, October 23, 2003 in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number EL993345831US addressed to: PATENT APPLICATION, Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Francis Guerra
(Name of Person Mailing Paper)


Signature

Enclosed are:

1. The papers required for filing date under CFR § 1.53(b):

| | | | |
|-----------|--|----|-----------------------|
| <u>24</u> | Pages of Specification (including claims); | 10 | Sheet(s) of Drawings. |
| | | | <u>X</u> Formal |
| | | | Informal |
 2. X Declaration or Oath (Combined with Pwr of Atty)
 3. X Power of Attorney (Combined with Declaration)
 4. X Assignment of the Invention to (including Form PTO-1595).
 5. Fee Calculation
- X Amendment changing number of claims or deleting multiple dependencies is enclosed.

CLAIMS AS FILED

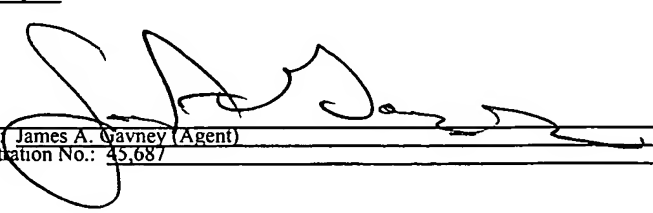
| | Number Filed | Number Extra | Rate | Basic Fee |
|-------------------------------------|--------------|--------------|------------------------|-----------|
| | | | | \$740.00 |
| Total Claims | 25 - 20 = | 5 | \$18.00 | 90.00 |
| Independent Claims | 4 - 3 = | 1 | \$84.00 | 84.00 |
| Multiple Dependent claim(s), if any | | | \$280.00 | |
| | | | Filing Fee Calculation | 914.00 |

6. X Applicant entitled to Small Entity Status

| | |
|--|--------|
| 50% Filing Fee Reduction (if applicable) | 457.00 |
|--|--------|
7. Other Fees

| | |
|------------------------------|---------------|
| - Assignment Recordation Fee | |
| - Other | 0.00 |
| TOTAL FEES ENCLOSED | 457.00 |
8. Payment of Fees
X Check in the amount of \$457 enclosed.
9. X Authorization to Charge Additional Fees
The Commissioner is hereby authorized to charge any additional fees (or credit any overpayment) associated with this communication and which may be required under 37 CFR § 1.16 or § 1.17 to Account No. 08-1275. An originally executed duplicate of this transmittal is enclosed for this purpose.
10. — Request for Non Publication
11. X Return Receipt Postcard

Dated: October 24, 2003

By: 
Name: James A. Gavney (Agent)
Registration No.: 45,687

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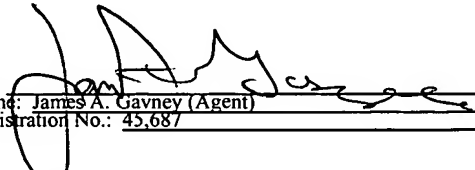
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